

INDIVIDUAL LETTER OF AGREEMENT
between the
STATE OF ALASKA
and the
ALASKA PUBLIC EMPLOYEES ASSOCIATION
representing the
SUPERVISORY UNIT

Re: (Employee Name), Acting Status

LOA SS-Dept # - FY-Sequence #

It is agreed between the parties that the following terms and conditions of employment will apply to (employee name), (title) with the Department of (title). No provisions of the July 1, 2004 through June 30, 2006 master agreement not specifically referenced herein is modified by this agreement.

The period of time Mr./Mrs. (employee last name) is authorized to perform the higher level of duties as (title), and to be effective from (date) to (date).

This agreement is entered into solely to address the specific circumstance of this particular situation. It does not establish any practice or precedent between the parties. This agreement shall not be referred to in any other dispute, grievance, arbitration, hearing, or any other forum, except as may be necessary for the execution of its terms.

FOR THE STATE OF ALASKA:

FOR APEA/AFT (AFL-CIO):

(Authorized Signature Name)
Department of (Name)

Name
(Title: Business Agent, etc.)

Date

Date